



# Send a little holiday mail to Dave's

John Sample  
11 ans street  
PO Box 123456  
anytown, NY 11205

1. What is your regular brand of cigarettes—that is, the brand you smoke most often?

2. Is your regular brand...? (Check one.)

☐ Lowest/1 mg. Tar ☐ Ultra/Extra Low Tar ☐ Light/Mild ☐ Medium ☐ Full Flavor

3. Do you usually buy it by the...? (Check one.) ☐ Pack ☐ Carton ☐ Both Ways

4. How long have you smoked this brand? (Check one.)

☐ Less than 1 year ☐ 1 to 2 years ☐ 2 to 3 years ☐ 3 to 5 years ☐ Over 5 years

5. Please list all the brands of cigarettes you smoked at least one pack of in the past two weeks. How many packs did you smoke of each brand? (Use as many lines as you need.

Write in the exact number of packs for each brand below. Note: 1 carton = 10 packs.)

Brand	No. of Packs	Brand	No. of Packs

6. What are some of your interests or hobbies?

By signing below, I certify that I am a cigarette smoker 21 years of age or older. I am also willing to receive cigarette coupons and branded incentive items in the mail, subject to applicable state and federal law.

Signature (Required)

Month / Day / Year

Date of Birth (Required)



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